

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000039876 (2)

1. Corporation Name
PINES LINCOLN MERCURY, INC.

Principal Place of Business

7411 MAPLE AVENUE
P.O. BOX 1400
PENNSAUKEN NJ 08109

Mailing Address

7411 MAPLE AVENUE
P.O. BOX 1400
PENNSAUKEN NJ 08109

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/05/1997

4. FEI Number

58-2321072

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

REIF, DANIEL S
C/O HOLMAN ENTERPRISES
911 N.E. SECOND AVENUE
FT. LAUDERDALE FL 33304

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	HOLMAN, J S	
STREET ADDRESS	350 STATION AVE	
CITY-ST-ZIP	HADDONFIELD NJ	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KOLB, J W	
STREET ADDRESS	407 CHESTER AVENUE	
CITY-ST-ZIP	MOORESTOWN NJ 08057	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HOLMAN, M K	
STREET ADDRESS	14 KENDLES RUN ROAD	
CITY-ST-ZIP	MOORESTOWN NJ 08057	
TITLE	D	<input type="checkbox"/> DELETE
NAME	REIF, D S	
STREET ADDRESS	2041 N.W. 86TH TERRACE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D, C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE	D, P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	K.A. Mullin	
53 STREET ADDRESS	75 T Paddock Path	
54 CITY-ST-ZIP	Moorestown, NJ 08057	
61 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
62 NAME	K.T. Coppola	
63 STREET ADDRESS	525 Chestnut Ave	
64 CITY-ST-ZIP	Moorestown, NJ 08057	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)